

# KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT-VISIBLE EMISSION OBSERVATION FORM

SOURCE NAME				OBSERVATION DATE					START TIME					STOP TIME								
MAILING ADDRESS				<div style="display: flex; justify-content: space-around;"> <div>SEC M</div> <div>0</div> <div>15</div> <div>30</div> <div>45</div> <div>SEC M</div> <div>0</div> <div>15</div> <div>30</div> <div>45</div> </div>																		
CITY                      STATE                      ZIP																						
SOURCE ID#		PHONE		1					31													
<div style="text-align: center; margin-bottom: 10px;"><u>FOR ROCK CRUSHERS ONLY</u></div> <div style="margin-bottom: 10px;">SITE ID#</div> <div style="margin-bottom: 10px;">COUNTY</div> <div style="margin-bottom: 10px;">LOCATION DESCRIPTION:</div> <div style="text-align: center;">S                      T                      R</div>				2					32													
				3					33													
				4					34													
				5					35													
				6					36													
				7					37													
				8					38													
				9					39													
				10					40													
				PROCESS EQUIPMENT		OPERATING MODE		11					41									
CONTROL EQUIPMENT		OPERATING MODE		12					42													
DESCRIBE EMISSION POINT				13					43													
				14					44													
HEIGHT ABOVE GROUND LEVEL		HEIGHT TO OBSERVER		15					45													
DISTANCE FROM OBSERVER		VERTICAL VIEWING ANGLE		16					46													
				17					47													
DESCRIBE EMISSIONS				EMISSION COLOR		18					48											
						19					49											
PLUME TYPE: CONTINUOUS <input type="checkbox"/> FUGITIVE <input type="checkbox"/> INTERMITTENT <input type="checkbox"/>				WATER DROPLETS PRESENT: NO <input type="checkbox"/> YES <input type="checkbox"/>		IS WATER DROPLET PLUME: ATTACHED <input type="checkbox"/> DETACHED <input type="checkbox"/>		20					50									
								21					51									
AT WHAT POINT IN THE PLUME WAS OPACITY DETERMINED				22					52													
				23					53													
DESCRIBE BACKGROUND(COLOR, SKY CONDITIONS, ETC.)				24					54													
				25					55													
WIND SPEED				WIND DIRECTION		26					56											
						27					57											
AMBIENT TEMPERATURE				RELATIVE HUMIDITY		28					58											
						29					59											
SOURCES LAYOUT SKETCH (DRAW NORTH ARROW)				30					60													
				AVERAGE OPACITY					NUMBER OF READINGS ABOVE ____% WERE ____													
				RANGE OF OPACITY READINGS ____ MINIMUM                      ____ MAXIMUM																		
				OBSERVER'S NAME (PRINT)																		
				OBSERVER'S SIGNATURE					DATE													
COMMENTS				ORGANIZATION																		
PERSON INTERVIEWED				VERIFIED BY																		
TITLE				DATE																		